

BEST AVAILABLE COPY

POSITION	ID NO.	DATE
CLASSIFIER	28	7/23/93
EXAMINER	452	7-31-95
TYPIST	357	10/31/96
VERIFIER	851	10-31
CORPS CORR.		
SPEC. HAND		
FILE MAINT.	452	8-1-95
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	5/25/93
1/1	5/25/93
2/2	5/25/93
3/3	5/25/93
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49/49	
50/50	

SYMBOLS

- ✓ Rejected
- Allowed
- (Through number) Canceled
- + Restricted
- N Non-elected
- Interference
- A Appeal
- O Objected

Claim	Date
Final	
Original	
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